

SAN LUIS OBISPO COUNTY STAND DOWN  
PRE-REGISTRATION FORM  
San Luis Obispo Veterans Hall, San Luis Obispo  
May 14<sup>th</sup> - 16<sup>th</sup>, 2015

For CVSO Use Only

Stand Down ID: \_\_\_\_\_

Time Registered: \_\_\_\_\_

Tent Assignment: \_\_\_\_\_

Vet Status Verified: \_\_\_\_\_

By Whom: \_\_\_\_\_

**Fax to: SLO Veterans Services 805-781-5769**

**Mail to: County Veterans Services**  
**801 Grand Ave. San Luis Obispo, CA 93401**

**(Pre-registration not required but recommended)**

**(Please use a pen and print clearly)**

Last Name \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_

SSN \_\_\_\_\_ VA Claim # \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone Number \_\_\_\_\_

Birth Date: \_\_\_\_\_ Male \_\_\_ Female \_\_\_ Color Hair: \_\_\_\_\_ Color Eyes: \_\_\_\_\_ Height \_\_\_\_\_ Weight \_\_\_\_\_

Do you have dependents? (Y/N) \_\_\_\_\_ How Many? \_\_\_\_\_ Any under 18? (Y/N) \_\_\_\_\_ will they Attend? (Y/N) \_\_\_\_\_

Branch of Service: \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_ Service # \_\_\_\_\_  
(Army, Navy, Air Force, USMC, CG) (MM/DD/YYYY) (MM/DD/YYYY)

Served in war zone? (Y/N) \_\_\_\_\_ Where? Vietnam \_\_\_ Korea \_\_\_ Europe \_\_\_ Pacific \_\_\_ Desert Storm \_\_\_ Other? \_\_\_\_\_

Do you have a service-connected disability? Yes \_\_\_\_\_ No \_\_\_\_\_ What Percent? \_\_\_\_\_

Have you ever been a patient at a VA Medical Center? Yes \_\_\_\_\_ No \_\_\_\_\_ Which One? \_\_\_\_\_

Have you attended a previous Stand Down? Yes \_\_\_\_\_ No \_\_\_\_\_

**DO YOU NEED ASSISTANCE WITH ANY LEGAL PROBLEMS? Yes \_\_\_\_\_ No \_\_\_\_\_**

Do you have an outstanding warrant in San Luis Obispo County? Yes \_\_\_\_\_ No \_\_\_\_\_

Do you have an outstanding warrant outside San Luis Obispo County? Yes \_\_\_\_\_ No \_\_\_\_\_ Where \_\_\_\_\_

Briefly describe the nature of your legal problems  
\_\_\_\_\_

**Name of Interviewer: \_\_\_\_\_ Agency: \_\_\_\_\_ Affiliation Date \_\_\_\_\_**

**NOTICE: I hereby assume all risk and danger incidental to participation at Stand Down 2015 whether occurring prior to, during, or subsequent to the event, including, among other things, the danger of personal injury and/or injury as a result of professional negligence, be it self-inflicted or as a result of others. Stand Down 2015 its sponsors, agents, support and/or service providers, and the agents, employees, and volunteers of these groups will not be liable for said injuries and I agree to hold them harmless there from. I further grant to Stand Down 2015 and its sponsors and service providers the right to photograph, film, tape, or otherwise reproduce and utilize my image as a participant or audience member at the event.**

\_\_\_\_\_  
Veteran Signature (Required)

\_\_\_\_\_  
Date